2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

CITY-ST-ZIP

SIGNATURE:

Secretary of State DOCUMENT # P98000058390 02-27-2006 90066 005 ***150.00 1. Entity Name BOCA RATON ORTHOPEDIC GROUP, INC. Principal Place of Business Mailing Address 660 GLADES ROAD 660 GLADES ROAD **BOCA RATON FL 33431 BOCA RATON FL 33431** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/05) City & State City & State Applied For 4. FEI Number 65-0846824 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent ON R. PURTH 6. Box Number is Not Appendiable)#46.0 CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. 2-15-06 (NOTE: Registered Agent signature required when reinstating) FILE NOW! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2006 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. ☐ Delete ☐ Change TITLE Addition WOLLOWICK, BURTON S P/D NAME STREET ADDRESS 660 GLADES RD., #460 STREET ADDRESS CITY-ST-7tP CITY-ST-ZIP BOCA RATON FL 33431 VPD ☐ Delete ☐ Change Addition TITLE TITLE NAME NAME PURITA, JOSEPH STREET ADDRESS STREET ADDRESS 660 GLADES RD., #460 CITY-ST-ZIP CITY-ST-ZIP BOCA RATON FL 33431 ☐ Delete TITLE Change Addition TITLE NAME: KOLETTIS, GEORGE 660 GLADES RD., #460 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **BOCA RATON FL 33486** ☐ Change Addition ☐ Delete TITLE NAME KREBSBACH, MICHAEL J NAME STREET ADDRESS 660 GLADES RD., #460 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **BOCA RATON FL 33431** SD ☐ Delete TITLE ☐ Change ☐ Addition TITLE STEWART, CHARLES E NAME NAME 660 GLADES RD., #460 STREET ADDRESS STREET ADDRESS **BOCA RATON FL 33431** CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition BROMSON, MARK S NAME 660 GLADES RD., #460 STREET ADDRESS STREET ADDRESS **BOCA RATON FL 33486** CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

FILED

2.15-06 561-391-5515

Date Date Dayline Phone #

Feb 27, 2006 8:00 am